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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/720,543
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	First Named Inventor	KIM, Jong Seok
	Art Unit	1746
	Examiner Name	Joseph L. Perrin
Total Number of Pages in This Submission	Attorney Docket Number	9988.083.00

ENCLOSURES (Check all that apply)			
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) (Replacing FIG. 9C)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <input checked="" type="checkbox"/> English Translation Abstract of CN 2424219 (cited in 10/05/06 IDS) <input checked="" type="checkbox"/> New PTO SB/O Form (1449) citing CN 2424219 <input checked="" type="checkbox"/> Fig. 9C Replacement Drawing (Clean Copy) <input checked="" type="checkbox"/> Fig. 9C Replacement Drawing (Annotated Copy)	
<table border="1"><tr><td>Remarks</td></tr></table>			Remarks
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
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